This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

Claims 1-9 (canceled)

Claim 10 (previously presented): A method of modulating pupil dilation, comprising:

administering to an eye of a patient a formulation comprising a first compound including an alpha 1 antagonist capable of disrupting an endogenous compound which stimulates a dilator muscle of the eye and a second compound characterized by its ability to reduce eye redness; and

allowing the formulation to remain in contact with the eye for a period of time and under lighting conditions where the dilator muscles would be stimulated in the absence of the formulation;

wherein the formulation as administered to a human eye elicits a redness response rating of +1 or less.

Claim 11 (previously presented): The method of claim 10, wherein the first compound is selected from the group consisting of an imidazoline, an alkylating agent including phenoxybenzamine, a benzenesulfonamide including Tamsulosin, a piperazinyl quinazoline including prazosin and not including dapiprazole.

Claim 12 (canceled)

Claim 13 (previously presented): The method of claim 10, wherein the second compound characterized by its ability to reduce eye redness is tetrahydrozoline.

Claim 14 (previously presented): The method of claim 10, wherein the formulation is administered in an amount so as to optimize pupil diameter in dim light to no more than 6 mm and pupil diameter in bright light to no less than 1 mm.

Claim 15 (original): The method according to claim 14, wherein said optimized pupil diameter in dim light is between and including 3 mm and 5 mm.

Claims 16-17 (canceled)

Claim 18 (original): A method for optimizing pupil diameter in dim light by minimizing its dilatation in response to less light, comprising administering a therapeutically effective amount of an imidazoline to an eye of a person in need thereof.

Claim 19 (original): The method according to claim 18, wherein said dilatation of the pupil diameter in dim light is minimized in response to less light, and wherein said method does not induce ciliary muscle contraction.

Claim 20 (original): The method of claim 19, wherein the imidazoline is selected from the group consisting of Phentolamine and Tolamine.

Claim 21 (original): The method of claim 19, wherein the imidazoline is phentolamine.

Claim 22 (original): The method of claim 21, further comprising: administering tetrahydrozoline hcl.

Claim 23 (currently amended): A method of modulating pupil dilation, comprising:

administering to an eye of a patient a formulation comprising a compound including an alpha 1 antagonist capable of disrupting endogenous compounds which stimulate dilator muscles of the eye and eliciting a redness response of about +1 or less on a scale of from 0 to +4; and

allowing the formulation to remain in contact with the eye for a period of time and under lighting conditions where the dilator muscles would be stimulated in the absence of the formulation.

Claim 24 (original): The method of claim 23, wherein the compound is selected from the group consisting of an imidazoline, an alkylating agent including phenoxybenzamine, a

benzenesulfonamide including Tamsulosin, a piperazinyl quinazoline including prazosin and not including dapiprazole.

Claim 25 (original): The method of claim 23, wherein the formulation further comprises a compound characterized by its ability to reduce eye redness.

Claim 26 (previously presented): The method of claim 25, wherein the compound characterized by its ability to reduce eye redness is tetrahydrozoline.

Claim 27 (previously presented): The method of claim 23, wherein the formulation is administered in an amount so as to optimize pupil diameter in dim light to no more than 6 mm and pupil diameter in bright light to no less than 1 mm.

Claim 28 (original): The method according to claim 27, wherein the optimized pupil diameter in dim light ranges from about 3 mm to about 5 mm.

Claims 29-36 (canceled)

Claim 37 (previously presented): An ophthalmic, night vision formulation, comprising:

a sterile aqueous carrier;

a therapeutically effective amount of a first pharmaceutically active compound including an alpha 1 antagonist capable of disrupting endogenous compounds which stimulate dilator muscles of a human eye; and

a second pharmaceutically active compound characterized by its ability to reduce redness in a human eye.

Claim 38 (previously presented): The ophthalmic formulation of claim 37, wherein the second active compound is tetrahydrozoline.

Claim 39 (original): The formulation of claim 37, wherein the first active compound is selected from the group consisting of an imidazoline including phentolamine and tolamine, an

alkylating agent including phenoxybenzamine, a benzenesulfonamide including Tamsulosin, a piperazinyl quinazoline including prazosin and not including dapiprazole.

Claim 40 (original): The formulation of claim 37, wherein the first active compound is an imidazoline present in a concentration in a range of from about 0.01 milligrams per cubic centimeter of aqueous carrier to about 50 milligrams per cubic centimeter of aqueous carrier and wherein the solvent comprises an ophthalmic artificial tear solution.

Claims 41-42 (canceled)

Claim 43 (previously presented): A method of reducing adverse visual effects of spherical aberrations on a human eye, comprising:

administering to a human eye a first active compound including an alpha 1 antagonist capable of reducing dilation of a human eye exposed to a low light environment as compared to dilation which naturally occurs absent the compound and generating a redness response of about +1 or less on a scale of 0 to +4.

Claim 44 (previously presented): An ophthalmic formulation, comprising: a first active compound comprising an imidazoline, the first active compound capable of reducing dilation of a human eye exposed to a low light environment as compared to dilation which naturally occurs absent the compound and generating a redness response of about +1 or less on a scale of 0 to +4, and a second active compound capable of reducing eye redness in a human eye.

Claim 45 (previously presented): The formulation of claim 44, wherein the imidazoline is selected from the group consisting of phentolamine and tolamine.

Claim 46 (previously presented): The formulation of claim 44, wherein the first active compound is composed of phentolamine.

Claim 47 (previously presented): The formulation of claim 44, wherein the second active compound comprises tetrahydrozoline.

Claim 48 (previously presented): The formulation of claim 47, wherein the second active compound comprises tetrahydrozoline hcl.

Claim 49 (previously presented): The formulation of claim 48, further comprising an aqueous solvent.

Claim 50 (previously presented): The formulation of claim 49, wherein the aqueous solvent comprises an artificial tear solution.

Claim 51 (previously presented): An ophthalmic, night vision formulation, comprising:

a sterile aqueous carrier;

a therapeutically effective amount of a first pharmaceutically active compound comprising an imidazoline, the first pharmaceutically active compound capable of disrupting endogenous compounds which stimulate dilator muscles of a human eye; and

a second pharmaceutically active compound capable of reducing redness in a human eye.

Claim 52 (previously presented): The ophthalmic formulation of claim 51, wherein the second active compound is tetrahydrozoline.

Claim 53 (previously presented): The formulation of claim 51, wherein the imidazoline is selected from the group consisting of phentolamine and tolamine.

Claim 54 (previously presented): The formulation of claim 53, wherein the imidazoline is present in a concentration in a range of from about 0.01 milligrams per cubic centimeter of aqueous carrier to about 50 milligrams per cubic centimeter of aqueous carrier and wherein the sterile aqueous carrier comprises an ophthalmic artificial tear solution.

Claim 55 (previously presented): A method of reducing adverse visual effects of spherical aberrations on a human eye, comprising:

administering to a human eye a first active compound comprising imidazoline, the first active compound capable of reducing dilation of a human eye exposed to a low light

environment as compared to dilation which naturally occurs absent the compound and generating a redness response of about +1 or less on a scale of 0 to +4.

Claim 56 (previously presented): The method of claim 55 wherein the imidazoline is selected from the group consisting of phentolamine and tolamine.

Claim 57 (previously presented): An ophthalmic formulation, comprising: a first active compound comprising an alpha 1 antagonist not including a dapiprazole, the first active compound capable of reducing dilation of a human eye exposed to a low light environment as compared to dilation which naturally occurs absent the compound and generating a redness response of about +1 or less on a scale of 0 to +4, and a second active compound capable of reducing eye redness in a human eye.

Claim 58 (previously presented): The formulation of claim 57, wherein the second active compound comprises tetrahydrozoline.

Claim 59 (previously presented): The formulation of claim 57, wherein the second active compound comprises tetrahydrozoline hcl.

Claim 60 (previously presented): The formulation of claim 57, further comprising an aqueous solvent.

Claim 61 (previously presented): The formulation of claim 60, wherein the aqueous solvent comprises an artificial tear solution.

Claim 62 (previously presented): A method of modulating pupil dilation, comprising:

administering to an eye of a patient a formulation comprising a first compound comprising an alpha 1 antagonist not including a dapiprazole, and a second compound capable of reducing eye redness, the first compound capable of disrupting an endogenous compound which stimulates a dilator muscle of the eye; and

allowing the formulation to remain in contact with the eye for a period of time and under lighting conditions where the dilator muscles would be stimulated in the absence of the formulation,

wherein the formulation as administered to a human eye elicits a redness response rating of +1 or less.

Claim 63 (previously presented): The method of claim 62, wherein the second compound comprises tetrahydrozoline.

Claim 64 (previously presented): The method of claim 62, wherein the formulation is administered in an amount so as to optimize pupil diameter in dim light to no more than 6 mm and pupil diameter in bright light to no less than 2 mm.

Claim 65 (previously presented): The method according to claim 62, wherein the optimized pupil diameter in dim light ranges from about 3 mm to 5 mm.

Claim 66 (previously presented): An ophthalmic, night vision formulation, comprising:

a sterile aqueous carrier; and

a therapeutically effective amount of a pharmaceutically active compound including an alpha 1 antagonist capable of disrupting endogenous compounds which stimulate dilator muscles of a human eye and generating a redness response of about +1 or less on a scale of 0 to +4.

Claim 67 (previously presented): The formulation of claim 66, wherein the pharmaceutically active compound is selected from the group consisting of an imidazoline, an alkylating agent including phenoxybenzamine, a benzenesulfonamide including Tamsulosin, a piperazinyl quinazoline including prazosin and not including dapiprazole.

Claim 68 (original): The formulation of claim 66, wherein the imidazoline is selected from the group consisting of phentolamine and tolamine.

Claim 69 (original): The formulation of claim 66, wherein the pharmaceutically active compound is an imidazoline present in a concentration in a range of from about 0.01 milligrams per cubic centimeter of aqueous carrier to about 50 milligrams per cubic centimeter of aqueous carrier and wherein the solvent comprises an ophthalmic artificial tear solution.